# MP20 Recogniziono de aug 2006

#### Application Data Sheet

Application Information

Application Type:: National Stage

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0

Title:: N-DEACETYLTHIOCOLCHICINE

DERIVATIVES, THEIR USE AND PHARMACEUTICAL FORMULATIONS

CONTAINING THEM

Attorney Docket Number:: 2503-1226

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 0
Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::
Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: EZIO

Middle Name::

Family Name:: BOMBARDELLI

Name Suffix::

City of Residence:: GROPPELLO CAIROLI

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIA GABETTA, 13

Address::

City of Mailing Address:: GROPPELLO CAIROLI

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-27027

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: GABRIELE

Middle Name::

Family Name:: FONTANA

Name Suffix::

City of Residence:: MILANO

State or Province of

Residence::

Country of Residence:: ITALY

Street of Mailing VIALE ORTLES, 12

Address::

City of Mailing Address:: MILANO

State o	or E	rovi	ince	of	Mailing	Address::		
Country	y of	E Mai	iling	Ad	dress::	ITAL	ľ	
Postal	or	Zip	Code	of	Mailing	Address:	:	I-20139

#### Correspondence Information

Correspondence Customer 00466

Number::

#### Representative Information

Representative Customer	00466
Number::	

## Domestic Priority Information

Application::	Continuity	Parent	Parent Filing
	Type::	Application::	Date::
This application	National Stage of	PCT/EP2005/000987	2/1/05

## Foreign Priority Information

Country::	Application	Filing Date::	Priority	
_	Number::		Claimed::	
ITALY	MI2004A000164	2/3/04	Yes	

### Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::